

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO.                    | DATE    |
|---------------------------|----------|---------------------------|---------|
| FEE DETERMINATION         |          |                           |         |
| O.I.P.E. CLASSIFIER       |          |                           |         |
| FORMALITY REVIEW          |          |                           |         |
| RESPONSE FORMALITY REVIEW | SA       | 6396617 <sup>103/01</sup> | 9-10-01 |

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim    | Date |
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| Claim    | Date |
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If more than 150 claims or 10 actions  
 staple additional sheet here

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